## PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

10606896

CLAIMS AS FILED - PART I (Column 1) (Col						mn 2)	SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			13				-	RATE	- FEE	) 	RATE	FEE
FOR			NUMBER FILED		NUMB	ER EXTRA	$\vdash$	ASIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			/2 minus 20=		*			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			∫ minus 3 =		*		-	х̈́42=	'	OR	X84=	
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT					+140=		OR	+280=	
* If	the difference	in column 1 is	less than ze	ro, ente	r "0" in c	olumn 2	L		375	OR	TOTAL	
CLAIMS AS AMENDED - PART II										·	OTHER THAN	
_		(Column 1) CLAIMS		(Colur		(Column 3)		SMALL E		OR	SMALL	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**	<del></del>	=	L	X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF M	Minus	***	T CLAIM	= [		X42=		OR	X84=	
		SELLI DEL ENDEM				- [	+140=		OR	+280=	-	
								TOTAL		OR	TOTAL ADDIT. FEE	
		AL	DIT. FEE			AUDII. FEE	9					
	2	° (Column 1) CLAIMS	22 N 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		HEST	(Column 3)			ADDI-			ADDI-
AMENDMENT B		REMAINING AFTER AMENDMENT		PREVI	IBER OUSLY FOR	PRESENT EXTRA		RATE	TIONAL   FEE		RATE	TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF M	Minus	***	CLAIM	]=		X42=		OR	X84=	
<u> </u>	TINOTTILOL	INTATION OF MI	SCHELL OLF	LINDLIN	CLAIN			+140≈		ÓR	+280=	
							<b>L</b>	TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)				-	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9≈		OR	X\$18=	
	Independent	*	Minus	***	T OL 4/44	=		X42=		OR	X84=	
<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=		OR	+280=	,
*	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."										TOTAL	
***	If the "Highest Nu	mber Previously P mber Previously F nber Previously Pa	aid For" IN THI	S SPACE	is less tha	an 3, enter "3."	AL	TOTAL DOIT. FEE	propriate bo		ADDIT. FEE	